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of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. **Docket Number (Optional)** PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 1422-0627PUS1 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 10/822,760-Conf. #3669 **Application Number** Filed April 13, 2004 METHOD FOR ISOLATING HEPATOCELLULAR PRECURSOR CELL Art Unit 1636 Examiner J. A. Dunston This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 \$ Two months (37 CFR 1.17(a)(2)) \$450 \$225 450.00 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 Four months (37 CFR 1.17(a)(4)) \$1590 \$795 Five months (37 CFR 1.17(a)(5)) \$1080 \$2160 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 GFR 1.34 June 12, 2006 Signature Date Marc S. Weiner (703) 205-8000 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted.

1.MIK.

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| Effectiv  | Complete if Known                         |                                |  |                           |                          |               |              |  |
|---|---|--------------------------------|--|---------------------------|--------------------------|---------------|--------------|--|
| Fees pursuant to the Consolida  | Application Number 10/822,760-Conf. #3669 |                                |  |                           |                          |               |              |  |
| FEE TRA   | Filing Date                               |                                | April 13, 2004   |                           |                          |               |              |  |
| For FY 2005   |   |                                | First Named Inv  | entor                     | Eiji MIYOSHI             |               |              |  |
|   | Examiner Name                             |                                | J. A. Dunston  |                           |                          |               |              |  |
| Applicant claims sma  | Art Unit 1636                             |                                |  |                           |                          |               |              |  |
| TOTAL AMOUNT OF PAYMENT (\$) 450.00   |   |                                | Attorney Docket No. 1422-0627PI                          |                           | 1422-0627PUS             | §1            |              |  |
| METHOD OF PAYMENT (check all that apply)  |   |                                |  |                           |                          |               |              |  |
| X Check Credit Card Money Order Other (please identify):  |   |                                |  |                           |                          |               |              |  |
| Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP            |   |                                |  |                           |                          |               |              |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |                                |  |                           |                          |               |              |  |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee                                |   |                                |  |                           |                          |               |              |  |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17                                     |   |                                |  |                           |                          |               |              |  |
| FEE CALCULATION   |   |                                |  |                           |                          |               |              |  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |   |                                |  |                           |                          |               |              |  |
|   | FILIN                                     |                                | ARCH FEES  | EXAMI                     | NATION FEES              |               |              |  |
| Application Type  | Fee (\$)                                  | Small Entity<br>Fee (\$) Fee ( | Small Entity  Specification  Specification  Small Entity | Fee (\$)                  | Small Entity<br>Fee (\$) | Foos F        | aid (\$)     |  |
| Utility   | 300                                       | 150 500                        |  | 200                       | 100                      | 1 003 1       | aid (ψ)      |  |
| Design  | 200                                       | 100 100                        |  | 130                       | 65                       |               |              |  |
| Plant   | 200                                       | 100 300                        |  | 160                       | 80                       |               |              |  |
| Reissue   | 300                                       | 150 500                        |  | 600                       | 300                      |               |              |  |
| Provisional   | 200                                       | 100 0                          |  | 0                         | 0                        |               |              |  |
| 2. EXCESS CLAIM FEES  | 200                                       |                                | · ·  | v                         | Ū                        |               | Small Entity |  |
| Fee Description Fee (\$)  |   |                                |  |                           |                          |               |              |  |
| Each claim over 20 (including Reissues)   |   |                                |  |                           |                          | 50            | 25           |  |
| Each independent claim over 3 (including Reissues) 20   |   |                                |  |                           |                          |               | 100          |  |
| Multiple dependent claims 360 180   |   |                                |  |                           |                          |               | 180          |  |
| Total Claims  |   |                                | Paid (\$)  | Multiple Dependent Claims |                          |               |              |  |
| -=  |   | E                              | <u>ee (\$)</u> <u>F</u>                                  | ee Paid (\$               | 1                        |               |              |  |
| Indea Oleima - Futus  | 01-1                                      | F (6) F                        | D-:4 (6)   | _                         |                          |               | _            |  |
| Indep. Claims Extra   | Claims 1                                  | Fee (\$) Fee                   | Paid (\$)  |                           |                          |               |              |  |
| 3. APPLICATION SIZE FE  | <del></del> ^ _                           |                                |  |                           |                          |               |              |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer     |   |                                |  |                           |                          |               |              |  |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 |   |                                |  |                           |                          |               |              |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |   |                                |  |                           |                          |               |              |  |
| Total Sheets  |   |                                |  |                           |                          |               |              |  |
| 100 = /50 (round <b>up</b> to a whole number) x =   |   |                                |  |                           |                          |               |              |  |
| 4. OTHER FEE(S)  Fees Paid (\$)   |   |                                |  |                           |                          |               |              |  |
| Non-English Specification, \$130 fee (no small entity discount)   |   |                                |  |                           |                          |               |              |  |
| Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00                           |   |                                |  |                           |                          |               |              |  |
| SUBMITTED BY  |   |                                |  |                           |                          |               |              |  |
| Signature   | Registration No. (Attorney/Agent)         | 32,181                         | Telephone  | (703) 205-8000            |                          |               |              |  |
| Name (Print/Type) Marc S. Weiner  |   |                                |  |                           | Date                     | June 12, 2006 |              |  |